

1. ~~Mr Muston~~ B.415
2. ~~Mr Morley Parry~~ A.421
3. ~~Mr Perry~~ A.405

RURAL DISTRICT OF MERE & TISBURY



Annual Report

of

The Medical Officer of Health

incorporating


The Report

of

The Chief Public Health Inspector



FOR THE YEAR 1968



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b29796593>

RURAL DISTRICT OF MERE AND TISBURY

ANNUAL REPORT

of

THE MEDICAL OFFICER OF HEALTH

Incorporating

THE REPORT

of

THE CHIEF PUBLIC HEALTH INSPECTOR

For the year 1968

1.3. Purpose of the Report: [Redacted]

1.4. Summary of Findings: [Redacted]

1.5. Recommendations: [Redacted]

1.6. Conclusion: [Redacted]

1.7. Appendix: [Redacted]

1.8. Signatures: [Redacted]

INTRODUCTORY SUMMARY

Special attention is drawn to the following sections of the Report.

In the 'Vital Statistics' Section:-

The 'standardized' general death rate of 10.0 per 1,000 is virtually the same as that for last year, but still fractionally lower than the previous year's rate for England and Wales, and for the County of Wiltshire. Nearly half of it was due to diseases of the heart or circulation and over a fifth due to cancer.

The maternal mortality rate is again nil.

The infant mortality rate of 7 per 1,000 live births is much lower than last year's rate of 20.0 but the perinatal death rate is high at 38 per 1,000 live births, because there were 6 still births.

The Cancer death rate is higher at 2.3 instead of 1.72 and nearly one third of these were due to Lung Cancer. The death rate from heart and circulation diseases at 6.5 is a little lower than last year (7.0), and is still the most frequent cause of death. Coronary disease, now classified by the Registrar General as "Ischaemic Heart Disease" (rate of 2.2) was the most frequent single 'circulatory' cause.

2. In the 'Communicable Disease' Section:-

The District was again fortunate in having a general low incidence of notifiable communicable diseases, (only 17). For the first time for many years no cases were notified for measles.

Notifications of respiratory tuberculosis rose from nil to four.

One case of (respiratory) tuberculosis died during the year.

Measles Immunisation began during the year.

3. In the 'Environmental Public Health and Food' Section:-

The need for enrichment of the fluoride-weak drinking water available from the Mere and Maiden Bradley sources remains. The West Wilts Water Board are still waiting for a lead from the Wiltshire County Council in this matter, which, unfortunately, had not been given by the end of the year.

The Mere and Maiden Bradley Sewerage and Sewage Disposal Schemes having been completed, thought is now given to schemes for East Knoyle, and Chilmark with Teffont.

In housing, in spite of the substantial amount of work done by the Council in providing Council dwellings in previous years there is still a great need for more housing accommodation for people at present without their own homes, plus a much smaller number of people who may be now living in worn out or insanitary buildings in the 'condemned' class. The number of families on the waiting list for housing by the Authority (272) remains nearly the same during the year. The need to conserve every acre of good agricultural land remains important for the health and welfare of this country.

THE MAIN PUBLIC HEALTH NEEDS - These remain as previously, namely:-

1. More homes, with the minimum encroachment upon agricultural land.
2. Enrichment of fluoride-weak drinking water supplies, to enable teeth to grow healthy and be durable, and reduce the risk from circulatory troubles and bone fragility in old age. (This must wait for action by the Wiltshire County Council, as "Local Health Authority".)
3. Less tobacco smoking. Continued effort to counteract the advertising of cigarettes.
4. Progress in sewage disposal schemes, in priority for East Knoyle, Teffont and Chilmark, Berwick St. John, The Donheads and Kilmington.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health: .. F. J. G. LISHMAN, M.D. (Hygiene), B.S.,
(London), D.P.H., (London), L.R.C.P.,
M.R.C.S., D.L.O., (England), L.M.C.,
(Canada).

Address: Office - 26, Endless Street, Salisbury.
(Tel. Salisbury 5201)
Residence - "Till Orchard", Berwick St.
James. (Tel. Stapleford 269)

Chief Public Health Inspector: H. SHARRATT, M.A.P.H.I.

Additional Public Health Inspector: R. KNOX, M.A.P.H.I.
(Left to take up an appointment at
Horncastle R.D.C., October, 1967)
B. ROBERTS, M.A.P.H.I.

Clerk (Mere Office): MISS D. MILLS.

Clerks (Salisbury Office): MISS L. BRYAN.
MRS. M. HEWETT)Part time with Surveyor
MISS A. SHEPPARD.) of Salisbury and Wilton
R.D.C.

The Medical Officer of Health also holds appointments as Medical Officer of Health for the Salisbury and Wilton Rural District, and for the Borough of Wilton, and, under the arrangement made in 1954, acts as a Medical Officer for the Wiltshire County Council. (Approximately two elevenths of the Salary for the Joint Appointment is allocated to the Mere and Tisbury Rural District Council and five elevenths to the Wiltshire County Council).

GENERAL STATISTICS

Number of Parishes	26
Area in Acres	71,319
Population, 1961 Census	11,195
Population, Registrar General's Estimate for mid year	11,480
Density of Population - people per acre	0.15
Number of inhabited dwellings (houses or flats)	4,159
Number of inhabited dwellings owned by the Council at the end of the year	763
Number of new Council dwellings built during the year	None
Number of applications for Council housing at the end of the year on waiting list	272

Rateable Value	£323,350
Product of a penny rate.. .. .	£1,227. 11. 8.

ADMINISTRATIVE CHANGES IN THE PUBLIC HEALTH DEPARTMENT DURING THE YEAR

There was no change during the year in the administration of the Public Health Department. Nationally, in the Autumn, the Health Services and Public Health Act 1968, and the Public Health (Infectious Diseases) Regulations 1968, made under the new act came into force. The former concerns the Rural District mainly indirectly through the Wiltshire County Council (As Local Health Authority), but the new Regulations concern the Rural District directly, and are commented on later.

VITAL STATISTICS

TABLE I

BIRTHS, INFANT MORTALITY AND MATERNAL MORTALITY

	Male	Female	Total
Live Births Legitimate	62	75	137
Illegitimate	6	7	13
Total.. .. .	68	82	150

Illegitimate Live Births per cent of Total Live Births 9.3

Crude Live Birth Rate per 1,000 population 13.1

Comparability Factor for Births - (This 'Standardizes' or compensates for age and sex distribution of the local population so that the standardized birth rate can be compared with the rate for England and Wales, and with similarly standardized birth rates in other areas). 1.19

Standardized Live Birth Rate.. .. . 15.6
(This is 92% of the national rate)

	Male	Female	Total
Still Births Legitimate.. .. .	1	3	4
Illegitimate	1	1	2
Total.. .. .	2	4	6

Total Live Births and Still Births 156

Still Births, rate per 1,000 Live and Still Births 38

						<u>Male</u>	<u>Female</u>	<u>Total</u>
Infant Deaths	Legitimate	..	..	..	..	0	1	1
	Illegitimate	..	..	..	..	0	0	0
	Total..	..				0	1	1

Infant Mortality Rate per 1,000 Live Births	Legitimate	..	..					7
	Illegitimate	..	..					0
	Total	..	..					7

For Comparison - I.M.R., England and Wales	..	..						..*
I.M.R., Wiltshire (previous year)	..	..	..					18.6

						<u>Male</u>	<u>Female</u>	<u>Total</u>
Neo Natal (in first four weeks) Deaths,	Legitimate					0	0	0
	Illegitimate					0	0	0
	Total					0	0	0

Neo Natal Mortality Rate	0
--------------------------	----	----	----	----	----	----	----	---

Neo Natal Mortality Rate (England and Wales)*
--	----	----	----	--	--	--	--	-----

						<u>Male</u>	<u>Female</u>	<u>Total</u>
Early Neo Natal Deaths (in first week)	Legitimate					0	0	0
	Illegitimate					0	0	0
	Total					0	0	0

Early Neo Natal Mortality Rate	0
--------------------------------	----	----	----	----	----	----	----	---

Early Neo Natal Mortality Rate (England and Wales)*
--	----	----	----	--	--	--	--	-----

Perinatal Deaths (Still Births + Early Neo Natal Deaths):

						<u>Male</u>	<u>Female</u>	<u>Total</u>
	Legitimate					1	3	4
	Illegitimate					1	1	2
	Total					2	4	6

*Perinatal Mortality Rate (per 1,000 Live + Still Births)						38
---	----	----	--	--	--	--	--	----

Perinatal Mortality Rate (England and Wales)*
--	----	----	----	--	--	--	--	-----

Maternal Deaths (including Abortion)	0
--------------------------------------	----	----	----	----	----	----	----	---

Maternal Mortality Rate per 1,000 Live and Still Births						0
---	----	----	--	--	--	--	--	---

* National figures not available at time of writing this report.

Comment

The Registrar General's estimate of mid-year population of the Rural District is unchanged, as was the case last year. The population is thus satisfactorily static. The birth rate has also remained the same at 15.6 per 1,000 population (standardized). The five previous years' 'standardized' birth rates were (1963) 18.2, (1964) 18.8, (1965) 17.4, (1966) 14.7 and (1967) 15.6. The Infant Mortality Rate is greatly reduced at only 7, lower than the County Rate, (for the previous year). But the relatively small number of births and deaths in a small population makes the calculated rate subject to a big chance factor. Each single death makes a difference of 6 units in the I.M.R. Thus a death on the 31st December instead of the 1st January, could cause a difference of 12 between the I.M.R., of one year and the next, hence big annual fluctuations can occur, especially when a lot of deaths happen to occur just before or after the end of a particular year.

*One feature in these statistics is the still rather high 'perinatal' death rate. This is entirely due to the occurrence of 6 still births during the year, with a P.M.R., of 38.

TABLE II

DEATHS AND DEATH RATES

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Number of Deaths	79	64	143
Crude Death Rate per 1,000 population	12.5
Comparability Factor for Deaths	0.80
This factor, being substantially less than unity, indicates that the age distribution of the local population is more elderly than that of the Country as a whole. Its application makes the local 'crude' rate comparable with that of the Country, and with similarly adjusted rates from other localities.			
Death Rate as standardized by Comparability Factor (This is 84% of the National Rate)	10.0
Death Rate for Wiltshire (previous year) - Standardized	10.2
Death Rate for England and Wales for comparison (But Registrar General has indicated that the Mere and Tisbury Rural District Death Rate (as standardized) is 84% of the National Death Rate)	-*

Comment

The standardized death rate is fractionally lower than that of last year, and again is very slightly less than that of Wiltshire.

*National Figures not available at time of writing this Report.

NATURAL INCREASES

Increase of Live Births over deaths for the year	..	..	..	7
Rate of Natural Increase, per 1,000 of population	..	..	..	0.6

TABLE III

Certain 'Specific' Death Rates in Inverse 'Health Index' Value (Rates per 1,000 population, except for maternal rate)

1.	Deaths due to Tuberculosis (all forms) - both sexes	..	..	1
	Tuberculosis Death Rate	..	..	0.1
	Deaths due to Respiratory Tuberculosis	..	..	1
	Respiratory Tuberculosis Death Rate	..	..	0.1
	Previous years Respiratory Tuberculosis Death Rate, Wiltshire for comparison	..	..	0.03
	Respiratory Tuberculosis Death Rate, England and Wales for comparison..	..	..	—*
2.	Deaths from Cancer and related Malignant Diseases	..	..	26
	Specific Death Rate from Cancer (all forms)	..	..	2.3
	Previous year's Death Rate from Cancer (all forms) Wiltshire			1.92
	Death Rate from Cancer (all forms), England and Wales			—*
	Deaths from Lung Cancer	..	..	8
	Specific Death Rate from Lung Cancer	..	..	0.7
	Previous year's Death Rate from Lung Cancer, Wiltshire	..		0.49
	Death Rate from Lung Cancer, England and Wales	..	..	—*
3.	Deaths from Heart Disease and other diseases of the circulatory system	..	..	74
	Specific Death Rate from Heart Disease	..	..	6.5
	Rate for Ischaemic Heart (Coronary) Disease only	..	..	2.2
4.	Maternal Deaths (due to Pregnancy, Childbirth or Abortion) ..			0
	Maternal Mortality Rate - per 1,000 live and still births..			0
5.	Deaths from Accidents and Violence (all forms)	..	..	7
	Deaths from Accidents and Violence (Motor Vehicles)	..	..	2

Comment

Certain of the specific 'index' mortality rates are analysed, or broken down, in the following Table IV. On the whole, there 'inverse indices' of the state of health of the community are satisfactory. Most are on the low side except the rate for Heart Diseases, and for Lung Cancer, which is higher than for Wiltshire. There was a '0.1' specific death rate from Tuberculosis and a 'nil' rate from Pregnancy, Childbirth and Abortion (Maternal Mortality). Both these latter statistics are satisfying to record. (See also comment after Table IV).

*National Figures not available at time of writing this Report.

ANALYSIS OF DEATHS BY CAUSE

The Registrar General provides for each district each year an analysis of deaths according to cause, broken down into many disease headings. These headings lend themselves to a considerable extent to 'grouping' the causes of death together in 'families' or types of disease related to each other, study of the trends in which groups may be of interest or value in regard to the particular population concerned. Advantage has therefore been taken of this opportunity to classify the Registrar General's annual table for this district into "Family" groups, labelled 'A' to 'O' as set out in Table IV. It will be noted however that the table is much longer, with many more "groups", for 1968 than formerly. This is because the Registrar General has adopted the new 1968 "International Classification of Diseases" for use in the table.

TABLE IV

ANALYSIS OF DEATHS BY CAUSES

GROUP A - Certain Communicable Diseases

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
1. Cholera	0	0	0	0
2. Typhoid Fever	0	0	0	0
3. Bacillary dysentery and amoebiasis	0	0	0	0
4. Enteritis and other diarrhoeal diseases	0	0	0	0
5. Tuberculosis of respiratory system	1	0	1	0.1
6. Other tuberculosis, including late effects	0	0	0	0
7. Plague	0	0	0	0
8. Diphtheria	0	0	0	0
9. Whooping cough	0	0	0	0
10. Streptococcal sore throat and scarlet fever	0	0	0	0
11. Meningococcal infection	0	0	0	0
12. Acute poliomyelitis	0	0	0	0
13. Small pox	0	0	0	0
14. Measles	0	0	0	0
15. Typhus and other rickettsioses	0	0	0	0
16. Malaria	0	0	0	0
17. Syphilis and its sequelae	0	0	0	0
18. All other infective and parasitic diseases	0	0	0	0
GROUP TOTAL	1	0	1	0.1

GROUP B - Cancer and related malignant diseases and benign neoplasms

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
19. Malignant neoplasm - stomach	3	1	4	0.35
20. Malignant neoplasm - lung, bronchus	6	2	8	0.7
21. Malignant neoplasm - breast	0	1	1	0.09
22. Malignant neoplasm - uterus	0	1	1	0.09
23. Leukaemia	0	0	0	0
24. Other malignant neoplasms, including neoplasms of lymphatic and haematopoietic tissue	9	3	12	0.1
25. Benign neoplasms and neoplasms of unspecified nature	0	0	0	0
GROUP TOTAL	18	8	26	2.3

GROUP C - Endocrine and metabolic and blood disorders

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
26. Diabetes mellitus	0	0	0	0
27. Avitaminoses and other nutritional deficiency	0	0	0	0
28. Other endocrine, nutritional and metabolic diseases	0	0	0	0
29. Anaemias	0	0	0	0
30. Other diseases of blood and blood- forming organs	0	0	0	0
GROUP TOTAL	0	0	0	0

GROUP D - Mental Disorders

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
31. Mental disorders GROUP TOTAL	0	0	0	0

GROUP E - Nervous System

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
32. Meningitis	0	0	0	0
33. Other diseases of nervous system and sense organs	1	2	3	0.26
GROUP TOTAL	1	2	3	0.26

GROUP F - Circulatory system

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
34. Active rheumatic fever	0	0	0	0
35. Chronic rheumatic heart disease	0	1	1	
36. Hypertensive disease	2	3	5	
37. Ischaemic heart disease (formerly "Coronary" Disease)	20	5	25	2.2
38. Other forms of heart disease	6	9	15	
39. Cerebrovascular disease (including "strokes")	9	12	21	
40. Other diseases of the circulatory system	4	3	7	
GROUP TOTAL	41	33	74	6.5

GROUP G - Respiratory system

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
41. Influenza	2	0	2	
42. Pneumonia	7	7	14	
43. Bronchitis, emphysema	4	4	8	
44. Asthma	0	0	0	
45. Other diseases of the respiratory system	1	1	2	
GROUP TOTAL	14	12	26	2.3

GROUP H - Alimentary system

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
46. Peptic ulcer	0	0	0	0
47. Appendicitis	0	0	0	0
48. Intestinal obstruction and or hernia	0	2	2	0
49. Cirrhosis of liver	0	0	0	0
50. Enteritis and Diarrhoeal Diseases other than those in Group A	0	0	0	0
50(a). Other diseases of the digestive system	0	2	2	0
GROUP TOTAL	0	4	4	0.4

GROUP I - Genital and urinary systems

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
51. Nephritis and nephrosis	0	0	0	0
52. Hyperplasia of prostate	0	0	0	0
53. Other disease of the genito- urinary system	1	0	1	0.1
54. Abortion	0	0	0	0
55. Other complications of pregnancy, childbirth and puerperium	0	0	0	0
GROUP TOTAL	1	0	1	0.1

GROUP J - Skin

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
56. Disease of the skin and subcutaneous tissue	0	0	0	0

GROUP K - Muscles and bones (other than accidents)

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
57. Disease of the musculoskeletal system and connective tissue	0	0	0	0

GROUP L - Congenital defects or injuries

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
58. Congenital anomalies	0	0	0	0
59. Birth injury, difficult labour, and other anoxic and hypoxic conditions	0	0	0	0
60. Other causes of perinatal mortality	0	0	0	0
GROUP TOTAL	0	0	0	0

GROUP M - "Ill defined"

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000 population</u>
61. "Symptoms" and ill-defined conditions	0	0	0	0

GROUP N - Accidents

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000</u> <u>population</u>
62. Motor vehicle accidents	1	1	2	0
63. All other accidents	0	3	3	0
64. Suicide and self-inflicted injuries	1	1	2	0
GROUP TOTAL	2	5	7	0.6

GROUP O - Other

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1,000</u> <u>population</u>
65. All other external causes	0	0	0	0
<u>ALL CAUSES, GRAND TOTAL</u>	79	64	143	12.5

Comment on Table IV

Deaths from Diseases of the Heart and Circulatory System, as usual the most common cause of death in this district, have very slightly fallen, from 7.0 to 6.5 per 1,000 and amount to just under half of the total number of deaths, and remain the greatest fatal endemic diseases affecting the district. Excepting No. 39, (stroke) which is liable to cause patients' relatives great discomfort, anxiety, and, for the relatives sometimes unbearable strain, this group is probably the most satisfactory one to belong to in the Registrar's case book of deaths. However, in the case of item 37, (Ischaemic Heart Disease) this does often involve a sudden and fearful blow to a family, where the breadwinner is taken away during probably the most lucrative and responsible period of life.

There was one death (Male) from lung tuberculosis, but I am sorry to report that the lung cancer death rate has again risen, from 0.35 in 1966, 0.6 in 1967 to 0.7 per 1,000. The 'nil' Maternal Death Rate has already been noted. The deaths from accidents and violence has again slightly increased, and included two suicides and two motor vehicle accidents.

Heart Disease

This high mortality from heart disease, is and is likely to remain for many years, a challenge to the public health departments. It is now believed that this can be reduced, or at least postponed to a later date, by the following measures:-

- (i) Certainly, be reduction of weight, especially in the already obese.

- (ii) Less certainly, but probably, by reduction of the amount of sugar, and of animal fat in the diet, (butter, cream, meat, fat, bacon fat, etc.) Fish oil and certain vegetable fats (e.g. linseed and maize oils) are believed to be less harmful, and indeed to some extent displace, or counteract, the effect of meat and milk fat, in the diet. It is thus safer to fry foods in 'corn' oil, than in butter, lard or meat 'dripping'.
- (iii) Regular moderate exercise - 'Walk instead of drive' - where practicable.
- (iv) Giving up the smoking of tobacco, or reducing it to a minimum of pipes or of cigars, but no cigarettes.

To publicise these measures, together with the special dangers of cigarette smoking in regard to two other dangerous diseases, lung cancer and bronchitis, is now a major duty of the public health department.

TOBACCO SMOKING - Lung Cancer and Other Effects

Evidence continues to accumulate about the harmful effects of smoking tobacco, especially in the form of cigarettes. But in addition to causing cancer of the breathing organs, the effect of these organs of chronic inflammation - Bronchitis - is becoming more and more evident. Effects in the heart and larger blood vessels are also well known. It is almost incomprehensible how adult people can ignore the advice of doctors in the face of the overwhelming evidence linking the childish habit of cigarette smoking with dangerous and socially destructive diseases.

COMMUNICABLE DISEASES

The measure of the extent to which people are immunised against communicable diseases in a district has become one of the 'indices' of the health of the community. 'Artificial' immunisation against certain diseases amenable to prevention, or attenuation, but this method is now available for a number of communicable diseases, which number increases every few years. As long as this method of protection against specific communicable diseases is not allowed to obscure the wider general measures for the promotion of health - housing, good nutrition, education, interesting occupation and creative use of leisure time - its gradual development and multiplication is all to the good. The longest established and so far most proven successful and lasting artificial immunisations, are those against smallpox and diphtheria. In more recent years protection against whooping cough, tetanus, measles and against poliomyelitis, have been accepted as normal practice. For Wiltshire, The Wiltshire County Council as Local Health Authority under the National Health Service, operates in this district a scheme for protection against these six diseases. Smallpox immunisations are done by the 'Family Doctors' under the National Health

Service for the County Council. These are now done at a later age, 5-18 months old, instead of the first six months of infancy. The other immunisations are performed either by the 'Family Doctors' or by the County Council's Medical Officers at Child Health Clinics or especially held immunisation clinics, usually arranged at Central Clinics or at village halls. In this area, all the immunisations (except for oral poliomyelitis) are still carried out by doctors, the practice of employing public health nurses (health visitors or especially experienced nurses) in this work not yet having been adopted for injections.

For the first time, Anthrax immunisations became available for certain people at special risk. In the Rural District Council this applies only to the Mere Brush Factory, and the County Council arranged for me to begin the immunisation of a small number of brush factory workers who handle imported material that could possibly harbour anthrax germs. This immunisation will be reinforced annually hereafter. Materials, however, go through a cleansing process before arriving at Mere.

Again this year, I am omitting the tables of immunisation statistics which the County Medical Officer of Health, Dr. C. D. L. Lycett, has regularly provided, broken down for each District separately. These tables are not received until after the drafting of this Annual Report, which is now rendered possible earlier in the year because the Registrar General sends me the annual statistical returns for the District in the late spring, instead of early summer, a welcome innovation due to the introduction of computers. This enables me to start drafting the Annual Reports for my three districts two months earlier than in years prior to 1966. The immunisation figures will, of course, later be available in Dr. Lycett's own Annual Report of the County Medical Officer of Health, which usually, being more complex, appears a little later in the year.

Incidence of Communicable Diseases

The communicable diseases for which statistics are available comprise only those diseases which are compulsorily 'notifiable' under the Public Health Act 1936, or the various Regulations which are operative. These were slightly amended by the Public Health (Infectious Diseases) Regulations which were enacted during the year. A proportion of these notifiable diseases does not get notified because although legally the head of the family used to be (under previous Regulations) responsible for notifying the Medical Officer of Health, in practice notification is rarely made unless a doctor attends, and he makes the notification.

Certain common communicable diseases, such as influenza, rubella and mumps, and also brucellosis and venereal diseases, because they are not generally 'Notifiable' cannot be included in this table, in which are recorded only those cases of diseases which are notifiable and are actually notified. Also, not all cases of notifiable diseases can be included, for

some minor cases may never have a doctor called to them and therefore do not get notified to the Medical Officer of Health. It is likely that a number of mild cases of whooping cough, for example, may occur but not be notified.

The notifiable communicable diseases actually notified during the year are set out in Table VI.

The year was again remarkable for an extremely low incidence of all kinds of notifiable disease, even measles. No cases of 'food poisoning' were notified, but two cases were otherwise discovered - of Salmonella Enteritidis Jena infection.

Tuberculosis

This year there were 4 new notified cases of Tuberculosis. At the time of writing this Report there was a total of 39 cases of Tuberculosis in my register for the Rural District. 30 of these were respiratory and 9 non-respiratory. This is a small reduction since a year previously, when, at the same time, there were 42 cases on the register.

As a cause of epidemic disease, heart, cancerous and respiratory diseases have replaced the old idea of 'infectious disease' as prime epidemiological culprits. Public Health workers are now trying to tackle this trio of killers with the same energy as they used to tackle the now weakening group of 'communicable' diseases.

The effort to persuade people to reduce tobacco smoking as a step in the prevention of bronchitis and lung cancer, is one example of modern epidemiology in the public health service, as are the avoidance of obesity, (especially if caused by excessive eating of sugar and animal fat), plus the taking of regular moderate exercise still, after middle age, as measures to reduce heart and circulatory diseases. However, the development of new types of 'infectious diseases' especially the very numerous different 'virus' diseases which are not yet notifiable, is beginning to present a new problem, as are strains of bacteria causing the older diseases which have become resistant to overworked forms of drug treatment. In this connection the massive feeding of antibiotics to farm animals subsequently to be used for human food is possibly dangerous, by tending to produce directly or indirectly, resistant strains of bacteria and also, perhaps, human allergies.

TABLE VI
NOTIFIABLE DISEASES NOTIFIED DURING THE YEAR

	Sub-div'ns of	Main	Group
	main diseases	Disease	Total
1. <u>Tuberculosis</u>			
(a) Respiratory		4

	Sub div'ns of main Diseases	Main Disease	Group Total
(b) Meninges and Nervous System ..	0		
(c) Other Forms	0		
(d) Group Total		4	4
<hr/>			
(Newly notifiable Respiratory Tuberculosis Rate per 1,000 population = Nil)			
2. <u>Other Respiratory Notifiable Diseases</u>			
(a) Whooping Cough		3	
(b) Pneumonia Acute		2	
(c) Group Total			5
<hr/>			
3. <u>Diphtheria</u>		0	0
<hr/>			
4. <u>Meningococcal Infection</u>		0	0
<hr/>			
5. <u>Virus Diseases of Nervous System</u>			
(a) Poliomyelitis - Paralytic ..	0		
(b) Poliomyelitis - Non Paralytic..	0		
(c) Total		0	
(d) Encephalitis - Infective.. ..	0		
(e) Encephalitis - Post Infective..	0		
(f) Total		0	
(g) Group Total			0
<hr/>			
6. <u>Other Notifiable Virus Diseases</u>			
(a) Measles (excluding Rubella) ..	0		
(b) Smallpox		0	
(c) Group Total			0
<hr/>			
7. <u>Alimentary Infection or Poisons</u>			
(a) Dysentery - Bacterial	2		
(b) Dysentery - Other	0		
(c) Total		2	
(d) Typhoid Fever		0	
(e) Paratyphoid Fever		0	
(f) Food Poisoning.. .. .		2	
(g) Group Total			4
<hr/>			

Sub div'ns of main diseases	Main Disease	Group Total
--------------------------------	-----------------	----------------

8. Streptococcal Group

(a) Scarlet Fever	5	
(b) Erysipelas	0	
(c) Group Total		5

9. Miscellaneous Group

(a) Puerperal Pyrexia	0	
(b) Ophtalmia Neonatorum	0	
(c) Other Notifiable Diseases	0	
(d) Group Total		0

10. All 'Notifiable Diseases' Total: 18

Comment

This year the normally expected biennial wave of measles should not have occurred but it is only about half last year's wave. Otherwise the statistics for notified communicable diseases are low and very satisfactory. It is especially fortunate that while certain other Rural Districts in Wiltshire suffered from Dysentery, the Mere and Tisbury Rural District, was, as far as discovered, quite free from this tedious and insanitary disease.

TABLE VI (a)

FOOD POISONING ETC.

(Salmonella Infections that are not considered to be food borne are not included under items (2), (3), or (4) but are shown separately under item (5)).

1. (a) FOOD POISONING NOTIFICATIONS (corrected) AS RETURNED TO REGISTRAR GENERAL.

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
0	0	0	0	0

(b) CASES OTHERWISE ASCERTAINED

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
0	0	2	0	2

(c) SYMPTOMLESS EXCRETERS

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
0	0	0	0	0

(d) FATAL CASES

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
0	0	0	0	0

2. PARTICULARS OF OUTBREAKS

Agent	No. of outbreaks		No. of cases		Total Number of Cases
	Family outbreaks	Other outbreaks	Notified	Otherwise ascertained	
Agent identified:					
(a) Chemical Poisons (Type to be stated)	0	0	0	0	0
(b) Salmonella typhimurium	0	0	0	0	0
(c) Staphylococci	0	0	0	0	0
(d) C. botulinum	0	0	0	0	0
(e) C. welchii	0	0	0	0	0
(f) Other Bacteria (named) (Salmonella Enteriditis Jena)	0	0	0	2	2
TOTALS	0	0	0	2	2
Agent not identified	0	0	0	0	0

3. SINGLE CASES

Agent	No. of Cases		Total No. of Cases
	Notified	Otherwise ascertained	
Agent identified:			
(a) Chemical Poisons (Type to be stated)	0	0	0
(b) Salmonella (Type S.typhimurium)	0	0	0
(c) Staphylococci	0	0	0
(d) Cl. botulinum	0	0	0
(e) Cl. Welchii	0	0	0
(f) Other bacteria (to be named)	0	0	0
Totals	0	0	0
Agent not identified	0	0	0

4. SALMONELLA INFECTIONS, NOT FOOD BORNE

Salmonella type	Outbreaks		No. of Cases (Outbreaks)	Single Cases	Total No. of Cases (outbreaks and single cases)
	Family	Other			
Totals	0	0	0	0	0

5. PARTICULARS OF OUTBREAKS

The two cases occurred in the same family group just after a continental trip, where they probably picked up the Salmonella Enteritidis Jena.

Comment

This table is a return required by the Ministries of Health, and Agriculture, Fisheries and Food, so is included in this Report in spite of its containing, very happily, minimal entry.

PERSONAL HEALTH SERVICES

Apart from the general medical, dental, specialist and hospital service of the National Health Service, the other personal Health Services for the Rural District are operated by the Wiltshire County Council. Among these are the Health Visiting Service, Midwifery Service, Home Nursing Service, Home Help Service, Ambulance Service, Chiropody Service, the Child Health Clinics and the School Health Service, with its specialised auxiliary services such as Speech Therapy and Guidance Clinics. The County Council are also responsible for the Mental Health Service (outside hospitals) and the 'Care and After-Care' service, which is largely concerned with tuberculous people, their families and other contacts, and with 'Chronic Sick' and aged people outside hospitals.

Cancer Prevention

Lungs: The County Council continues its anti smoking health education campaign.

Breast, Uterine and Cervical Cytology Clinics: This service is now provided in various parts of Wiltshire by the County Council. At the end of the year the nearest of these clinics were at Salisbury and Warminster. Arrangements are also made for Wiltshire women from the Mere area to attend the Dorset County Council Clinic at Gillingham if this is more convenient to them. This is a valuable service and I hope that as many women aged 25-55 as possible will avail themselves of it. Details of tests carried out will probably be found in the imminent Annual Report of the County Medical Officer of Health.

Family Planning

Clinics run by the F.P.A., but supported partly by the Wiltshire County Council are now operating twice a week at the Central Health Clinic, Salisbury, and another is available at Bath.

Handicapped Children

The School Health care and special education needs of handicapped children also comes under the Wiltshire School Health Service.

School Premises

The hygiene of School premises, as of most other buildings, concerns the Local Public Health Authority as well as the Educational Authority, and school premises are inspected by your Medical Officer of Health in his capacity as such, and also as School Medical Officer. A number of recommendations for improvements in school premises, fittings and sanitary arrangements for improving hygienic conditions were made during the year,

special attention being paid to the dish and utensil washing facilities in the service for school meals and the quality and quantity of hand washing equipment in proximity to voiding accommodation. The Rural District Council is fortunate in having two excellent and modern secondary schools within its area, the Dunworth at Tisbury and the Duchy Manor at Mere. Each of these now has an excellent swimming pool.

Pre-School Playgroups

To meet the need for companionship, play-activity and fundamental education, pre-school playgroups are being established in many parts of the county, some by Local Authorities (when they are sometimes called nurseries or nursery schools, if they have 5 or more children over age 5), or by private individuals. There were, at the end of the year, privately run pre-school playgroups operating in the Rural District as follows:-

1. Mere - The Old Rectory, Mrs. Longbourne.
2. Mere - At Youth Club.
3. Teffont Magna - Hill Meadow, Mrs. Long-Fox.
4. Tisbury - Congregational Hall, Mrs. B. Oliver.
5. Tollard Royal - (Sandroyd School Grounds).

The County Health Department have arranged for me to inspect these, and any proposed new, playgroups within the Rural District. At the time of writing this report, I had inspected and approved two more new playgroups, at Chilmark and Ludwell.

Handicapped Adults

The Social care of handicapped adults, including the blind and deaf and of old people, comes under the County Council services. But the Local Authority has obligation in regard to their housing, and has certain powers, under Section 47 of the National Assistance Act for enforcing institutional care if necessary. The Local Authority has also delegated some of its power as permitted by the National Assistance (Amendment) Act, 1951, to the Medical Officer of Health, to act on his own authority in emergency, to obtain a Justice's order, for a period of up to three weeks detention, in hospital or a Welfare Home. The Medical Officer of Health saw a few old people, to a greater or less extent needing care and attention. In this particular Rural District, however, removal to an institution was either unnecessary or was arranged for voluntarily, either by the person applying to the County Council Welfare Department, or the family doctor making arrangements for admission to hospital. I am glad to say that compulsory powers did not have to be used this year, nor for several years past, in this District.

ENVIRONMENTAL PUBLIC HEALTH AND FOOD

This is still probably the most important of the various factors which influence public health.

As stated in previous Annual Reports and annually repeated because of its basic importance, human health is still greatly influenced by the environment (including housing) and the extent to which man can adapt this to suit his needs. Health is also largely dependent upon the quantity and quality of food supplies. Fundamental to good health are such influences as housing, a water supply containing the necessary mineral impurities for promoting health but free from harmful bacteria, etc., safe (and preferably not wasteful) disposal of body wastes, refuse collection and disposal, control of flies, mosquitoes and other insects, rodents and other vermin, quality, quantity and freedom from adulteration or infection of food supplies including especially such universal and basic foods such as bread, milk, meat. Food hygiene concerns not only the home, but also places where food or drink are prepared or consumed, including schools and other eating rooms, public restaurants, hotels and public houses. Avoidance of certain adverse habits such as excessive tobacco smoking or excessive regular alcohol drinking, is also important.

Some of these matters are reported upon in detail in the Report of the Chief Public Health Inspector, Mr. H. Sharratt, which is incorporated in this Annual Report. Comments on the following matters are, however, made in this section of the Report.

1. Housing

This is probably the most important, among man-controlled ones, of the various factors influencing health mentioned above. Bad housing, (or worse, no housing accommodation), overcrowding, living with 'in laws', adjacent to noisy neighbours, are monotonously found to be at the back of many peoples worries, domestic or occupational, much of which could be alleviated with corresponding improvement to mind and body if more peoples housing problems could be solved. The full extent of the housing problem cannot be measured only by the size of the Local Authority's waiting list of applicants for Council Houses or apartments ('flats'), though these waiting lists are large. Some people are probably living in unsuitable accommodation who have not applied for Council Housing. At the end of the year there were 272 actual applications for Council Housing on the waiting list, an increase of 2 compared with the end of the previous year.

Housing Statistics

A copy of the annual return which I am required to make to the County Medical Officer of Health of Wiltshire will be found on pages 3 and 4 of the report of the Chief Public Health Inspector.

The number of dwellings in this Rural District at the end of the year was 4,159. Accommodation owned by the Council consisted of 53 flats, 128 bungalows, 582 other dwellings, total 763. Neither of the projected 'grouped dwellings' for old or handicapped people at Mere and Tisbury had started construction by the end of the year but were under way by the time this report was completed. They are badly needed.

Improvement Grants

'Discretionary' Grants were continued during the year. The smaller 'Standard' Grants were of course continued also. Discretionary Improvement Grants in respect of 6 dwellings were approved during the year. A further 11 Standard Grants were made; under the House Purchase and Housing Act, 1959. These Standard Grants are largely concerned with provision of baths, water closets and kitchen facilities, and are mandatory on the Council, if the conditions are suitable, so a substantial increase may be expected, as more public sewage schemes are developed. The amount of work falling on the staff of the Public Inspectors in connection with these Improvement Grants is heavy, but their value is great.

Food Storage and Refrigerators

Modern eating and purchasing habits have become conditioned to ability to store food really cold. This is especially true in the country, where the housewife may buy a whole week's provisions at only one day's shopping visit to the nearest place with shops.

Tenants of Council Houses of this Authority are very fortunate in being able to rent a refrigerator from the Council at a very moderate weekly rate. This facility is well used and appreciated. However, since part of the previous year, no new renting arrangements could be made because the Ministry of Housing and Local Government had put a stop, as an 'economy cut', to the Council buying any further refrigerators to let. At the end of the year 206 refrigerators were out on hire from the Council.

Retired People

The venture begun some years ago by the Mutual Households Association with Grant and Loan from the Council under which the country mansion of Pyt House has been adapted for the housing, in about 30 different apartments, of 'Retired' people, still continues. There is a good community spirit and under one paid Garden Supervisor most of the care of the exterior grounds is undertaken by the residents themselves.

Special Housing Needs of Old People

I have referred previously to the need for, and the Council's intentions to provide, two grouped dwellings, at Mere and Tisbury. At

the time of writing this Report construction had begun. In addition the Council's Surveyor's Department is willing to carry out minor adaptations and amenities in the Council Homes for old or handicapped people.

Slum Clearance

This continues, but the worst cases have been dealt with and no dwellings were demolished. But closing orders in respect of 4 dwellings were made during the year as the result of statutory action.

2. WATER SUPPLIES

In 1960, the Council's Comprehensive Water Supply Scheme became incorporated in the Regional Water Supply Undertaking of the West Wilts Water Board, the headquarters of which are at Warminster. I have been impressed by the importance attached by the Board's staff to frequent bacteriological analysis of water supplies in this Rural District and the great infrequency of anything other than a fully satisfactory bacteriological result. However, chemical analyses have been only occasional and I would welcome seeing more frequent reports on residual chlorine levels at distant peripheral points in the distribution system.

Some further checks by chemical and bacteriological sampling and analysis of the West Wilts Water Boards Waters, are still carried out by the staff of the Council as Public Health Authority. Details of these, together with analyses of waters in the remaining private supplies, are set out in the report of the Chief Public Health Inspector.

Out of the inhabited houses, 3,196 out of 4,159 had at the end of the year, a piped public supply to the house itself. A substantial further number have water from private or farm piped supplies. The picture, parish by parish, is set out in the report of the Chief Public Health Inspector. The position is steadily improving as the Council's old Comprehensive Water Supply Scheme to cover the district is being developed by the West Wilts Water Board.

Fluoride

In the annual circular received from the Ministry of Health referring to preparation of the Annual Reports of Medical Officers of Health, information is especially requested about fluoride content of drinking water supplies. This information has been, in fact, included in my annual report for many years.

Chemical analyses of the water from the Burton Field, Mere source, while otherwise good, has shown that the Fluoride Content of the water is too low-varying from 0.08 to 0.15 parts per million, averaging 0.1 part

per million, which is only one tenth of the desirable one part per million, needed for promoting the growth of strong, decay-resisting teeth in the formative phases. The fluoride content of the Maiden Bradley source is much the same as that of the Burton Field source. Details are as follows:-

Analyses taken in May, 1968 - Mere, Burton Field Source	0.09
Maiden Bradley, Dunkerton Springs.. ..	0.08
Donhead Source	0.12
Sedgehill	0.1
Stourton	0.15
(National Trust)	
Fonthill Estate Supply	0.1

Details of other chemical analyses of various waters are given in the tables set out in the report of the Chief Public Health Inspector.

Fortification of the sources with extra fluoride salts to bring it up to the desirable quality, for dental and other health purposes, could be a simple matter at a cost of about 1s. to 1s. 6d. per head per annum, and the Ministry of Health is actively encouraging Water Authorities to supplement natural fluoride content of drinking waters, when insufficient. In 1964 this Council did approve the principle of fluoridation. Unfortunately the Water Board must wait for authority to start fluoridating the supplies from the Local Health Authority (or Authorities) concerned with its distribution area. So far neither the Wiltshire, the Dorset, nor the Somerset County Councils, as 'L.H.A's.' have given this approval, lagging behind the Midlands and Northern Local Health Authorities in this country. Thus a wise 'Local Sanitary Authority' or water undertaking may be prevented from carrying out its wishes by the hesitations of a 'Local Health Authority'. The cost of fluoridation is only a fraction of that annually needed for dental treatment and within a few years the cost of all capital expenditure would have been recovered, by saving some of the cost of dental treatment under the National Health and School Health Services, once the existing backlog of treatment has been overtaken.

I believe that there is no public health measure which would do more to improve dental, and therefore general, health so quickly and so cheaply, as enriching fluoride-weak drinking waters. The benefits which will effect babies and young children will persist through life, and there is now also some evidence that old people who have been used to drinking water with a good fluoride content will not suffer so much from bones weakened by osteoporosis liable to fracture, and that their great arteries and coronary vessels may be rendered less liable to the condition of "atherosclerosis", which is responsible for their deterioration after middle age.

3. DRAINAGE AND SEWAGE

Among the five public sewerage systems maintained by the Council, those at Hindon, Tisbury and Zeals were working well, and the Mere works, completed in 1966, were still composing themselves. New works at Maiden Bradley were completed. The Council have prepared a priority list for providing sewage disposal works and sewers for these parishes in the Rural District. The top priorities were East Knoyle, Chilmark with Teffont, and Berwick St. John, and a scheme has already been prepared for East Knoyle, by the Council's Consulting Engineers, Messrs. T. Ward Whitfield & Son of Trowbridge. At the time of writing this report, the priorities after completing East Knoyle and Chilmark with Teffont schemes, were being reconsidered.

Drainage into streams

The complaints of occasional pollution by house drainage (mainly sullage water) of small streams, have again been less evident this year. The little streams in the villages of Chilmark, Teffont and Berwick St. John are those mainly concerned with this occasionally recurrent nuisance.

Septic Tank Cleansing and Cesspit Emptying

Since 1965 the Council have provided a regular evacuating service for places within the Rural District not served by a sewer. The scheme has proved most beneficial. Details will be found in the report of the Chief Public Health Inspector. The evacuating vehicle was regularly hired for use by the neighbouring Warminster and Westbury Rural District Council, but is to be kept within its own Rural District in future, because if it goes outside it generates an exorbitant tax.

4. REFUSE COLLECTION AND DISPOSAL

Arrangements for collection and disposal places are described in the Chief Public Health Inspector's section of the report.

A substantial income from salvage refuse is obtained. Details of income from this source are also given in the report of the Chief Public Health Inspector.

5. ROADSIDE FILTH

Years ago in my Annual Reports I hoped that some action would soon be taken by the County Council, as Highways Authority, about fouling of the countryside close to main roads. Particularly serious is the pollution near the lay-bys in the A.303 road east of Chicklade on Wylve Down. Flies can carry infection from the deposits of faeces onto blackberries. Little progress was made during 1965 but during 1966 a scheme

for the establishment of a large Public Convenience at the Furze Hedge Cross Roads on the A.303 west of Chicklade was under consideration. However, a change of policy resulted in planning permission for this installation being refused, and instead the County Council, as Highways Authority, notified that they would provide a mobile van type Male and Female convenience, for use on A.303 lay-bys, the cost of maintenance being shared by the Rural District Council and County Council. This was done, and was well used, but was then and subsequently left all the season in one lay-by, just west of Willoughby Hedge. It is probably too far west to affect the major haunt of the polluters, which is on the ridge between Chicklade and Wylke. In 1968, a second mobile public convenience was provided by the Wiltshire County Council and located just east of Zeals on the A.303. As in the case of the first public convenience the Mere and Tisbury Rural District Council staff are responsible for the daily maintenance, and do an excellent job. Further details, and maintenance figures, are given in the report of the Chief Public Health Inspector.

6. FOOD HYGIENE

Watercress

During the year increased efforts were made to lessen the likelihood of contamination of this excellent food in the growing beds with further protection by the owners providing hypochlorinating washes for the cress before despatch to market. However, only 8 out of the 24 samples of cress, even though thoroughly washed in hypochlorinated water, were quite satisfactory, while samples of the water feeding the beds were sometimes dubious or poor on analysis.

Milk

The work of inspecting retail premises and sampling and analysing the milk is still done by the Rural District Council for the Wiltshire County Council on an agency basis, charging the Wiltshire County Council 15s. 6d. a sample. Milk supplies have been generally quite satisfactory during the year. Sampling of milks for analyses by four methods were continued until October.

The methods are:-

- (1) 'Methylene Blue Test', for general cleanness and keeping quality for which there were no 'failures' among samples analysed.
- (2) 'Phosphatase Test', for adequacy of heat treatment of 'Pasteurised' milk, for which there were no failures among samples analysed.

- (3) 'Turbidity Test', for 'sterilised' milk.
- (4) 'Biological Test', which consists of inoculation of a guinea pig, and its subsequent examination after a five or six weeks interval for signs of either tuberculosis or brucellosis. Out of a total of 13 samples taken for biological tests, all were negative for tuberculosis and all negative for brucellosis.
- (5) The biological test is being increasingly supplemented or superceded by a two week culture test in the laboratory.

All the analyses on these milks were carried out at the Public Health Laboratory attached to Odstock Hospital, near Salisbury.

Ice Cream etc.

Comments concerning this and other foods, and maintenance of the 'clean food campaign', will be found in the report of the Chief Public Health Inspector.

BRISTOL 1/1/68

7. CLEAN AIR

The Clean Air Act contains valuable provisions to enable local (Air) Authorities to improve the quality of the air within their districts. Fortunately the Mere and Tisbury Rural District has virtually no problem concerning its air, but the provisions of the Act, and any byelaws made by the Council under the Act, will enable the Council to prevent future pollution. Periodical observations of the type and amount of smoke from the few factory chimneys are made, and no action has been necessary in the Rural District during 1968.

The complaints of odours from the dog food factory at Tisbury which used to be frequent and bitter have been reduced, with good co-operation from the factory owners who in 1966 installed entirely new cooking equipment with deodorisation of the tripy gasses (which compose the worst of the odours) in a chlorinating spray cylinder. The nasty smelling ingredients such as tripe are stored in an enormous refrigerated chamber where they freeze rock hard and are rendered virtually odourless, until ready for processing into the dog food. However, I have still occasionally smelled a tripy odour when travelling along the Avenue, and the inhabitants of the dwellings at the eastern end of that road may still have occasional cause for complaint.

8. MEAT INSPECTION

The work done during the year is set out in the report of the Chief Public Health Inspector.

9. CARAVANS - CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT 1960

A note on this Act is included in the report of the Chief Public Health Inspector.

10. GYPSIES

Reference should be made to the sections dealing with these in the Report of the Chief Public Health Inspector. During the year the problems of gypsies who have no proper camping ground within the district inevitably increased as they are displaced by other Local Authorities. No progress has been made in the way of providing one or more sites, with facilities for a water supply and excrement disposal, and within reasonable access to schools for the children.

Under powers described in various Ministry of Housing and Local Government or Health Circulars, such as Ministry of Housing and Local Government No. 26/66, either County Councils or District Councils have power to provide such permanent sites. Because of the shifting situation, temporarily and geographically, of gypsies between adjacent County Districts, the County Councils would generally be the more appropriate Authorities to provide this much needed service, though some Rural District Councils, such as Eton R.D.C., and Godstone R.D.C., have provided sites. That in the Godstone R.D.C. in addition to the basic necessities mentioned above, has provided an electric washing machine operatable by inserting 2s. 6d., and hot water male and female shower baths working for six minutes for 6d. So far the Wiltshire County Council has not made any such provision, but there are grounds for hope that developments may occur in 1969, beginning with the Salisbury area.

11. SWIMMING FACILITIES

Although there are lakes within the District, the rivers are too small or unsafe to provide very satisfactory swimming, especially for learning to swim. A covered public pool is available outside the district, at Frome, and an open one at Gillingham School. There are others at Salisbury and Shaftesbury. There are small pools at Dunworth Secondary Modern School, Tisbury, Duchy Manor Secondary Modern School, Mere and the Primary Schools at East Knoyle (portable type), Ludwell and Semley, and at two private Schools for girls, St. Mary's Convent, Donhead St. Mary, and Cranborne Chase School, Wardour. There is also a private open air swimming pool at the Pyt House Country Club, open to members and their guests only. There are no other good places for teaching swimming within the Rural District. At each of the swimming pools the water is checked daily for chlorine content by school staff, and the effectiveness of the 'Break Point' chlorination is also checked about once a week by one of the Public Health Inspectors.

Artificial Respiration and Resuscitation of the Drowned

The mouth to nose method is now taught to school children by selected teachers who themselves received instruction from the County Council medical staff, including myself, occasionally.

12. ROAD SAFETY

I am glad to report that the Council, at the end of last year, decided to start a Road Safety Committee, whose main task is to promote the teaching of children to ride bicycles, and later motor cycles, in a thoughtful and safe manner.

13. RECREATIONAL FACILITIES

Apart from the swimming facilities mentioned in paragraph 11 above, the countryside of the Rural District provides wonderful facilities for recreation. So does the superb National Trust asset of Stourhead Park. For games, apart from school premises, Mere and Tisbury villages both have quite good recreation grounds, on the borders of the villages. Chilmark has a pleasant "Childrens Playing Field", gifted by a local man for the benefit of the children of Chilmark.

14. SUMMER CAMP

Each year 'Camp Mohawk' reopens for the summer and autumn months in Fonthill Abbey Park, receiving batches of hundreds of U.S.A. forces adolescents who stay from one to two weeks for the typical American 'summer camp' holiday. This is a well organised and admirable venture, with splendid sanitary and food hygiene facilities and wonderful sylvan and aquatic recreation.

15. PUBLIC CONVENIENCES

The Rural District possesses one of the most attractive and hygienic of any public conveniences. This is at Mere, in the public car park. It is built of beautiful reconstructed Portland stone with a male and female end. Each end has an automatic press button hand washing machine supplying hot water, liquid soap and drying of hands by hot air blower.

The public conveniences in Tisbury, particularly the male ones, are in a sorry contrast to those in Mere, but the Public Health Committee are aware of the need for improvement in Tisbury, and provision of new ones was, by the end of the year decided. I hope these will be ready in 1969.

Reference has already been made to Roadside Public Conveniences.

16. FARM EFFLUENT

There has been no further complaint during the year about the considerable nuisance which occurred on several occasions in previous years due to the spraying into the air of effluent from the manure tanks of intensive 'Factory Farms'. This spray forms aerosols which can be wafted great distances, on the breeze, and the aerosols have dreadful odours. They may, quite probably, be a danger to health also, if they are inhaled or settle on food or babies prams. This is a national problem which is being studied by the Public Health Committee of the Rural District Councils Association and the Ministry of Agriculture, Fisheries and Food.

17. MEALS ON WHEELS SERVICE

Since 1963 the Council have been contributing financially towards a Meals on Wheels Service, run in this area by the Women's Voluntary Services, to which the Wiltshire County Council also contribute materially. The service is at present confined to the Mere Parish, Tisbury, Zeals and Kilminster. There is a need for expansion of the service to other parts of the Rural District, such as the Donheads.

18. ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

In this Rural District inspections are carried out by the Public Health Inspectors, not by veterinary surgeons. One establishment is licensed.

19. OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Details are reported in the Chief Public Health Inspector's section. With the regrettable closure, for passengers, of Semley railway station, access to and from this unfortunate village for shopping becomes increasingly difficult, and Tisbury is now the only railway station open to passengers, in the Rural District.

20. TABLE VII -- FACTORIES ACTS, 1937 to 1959

Particulars prescribed by the Ministry of Labour of the Acts in so far as the Local Authority is concerned.

PART I OF THE ACT

1. INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors.)

Premises (1)	Number in Register (2)	Number of Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which sections 1,2,3,4 and 6 are to be enforced by Local Authorities	3	3	Nil	Nil
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	29	25	1	Nil
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	17	17	Nil	Nil
TOTAL:	49	45	1	Nil

2. CASES in which DEFECTS were found.

Particulars (1)	Found (2)	Number of cases in which defects were found			Number of cases in which prosecutions were instituted (6)
		Remedied (3)	Referred		
			to H.M. Inspector (4)	By H.M. Inspector (5)	
Want of Cleanliness (S.1)	Nil	Nil	Nil	Nil	Nil
Overcrowding (S.2)	Nil	Nil	Nil	Nil	Nil
Unreasonable temperature (S.3)	Nil	Nil	Nil	Nil	Nil
Inadequate ventil- ation (S.4)	Nil	Nil	Nil	Nil	Nil

PART VIII OF THE ACT

Outwork

(Sections 110 and 111)

Nature of Work (1)	No. of outworkers in August list required by Section 110(1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in unwholesome premises (5)	Notices served (6)	Prosecutions (7)
Wearing } Making Apparel } etc., } Cleaning } and } Washing	19	0	0	0	0	0
Household Linen	0	0	0	0	0	0

No outworkers were known to be practising any of the following types of work as listed under Part VIII of the Act.

Lace, Lace curtains and nets, Curtains and furniture hangings, Furniture and upholstery, Electro plating, File making, Brass and brass articles, Fur pulling, Iron and Steel cables and chains, Iron and steel anchors and grapnels, Cart gear, Locks, latches and keys, Umbrellas, etc., Artificial flowers, nets, other than wire nets, Tents, Sacks, Racquet and tennis balls, paper bags, the making of boxes or other receptacles or parts thereof made wholly or partially of paper, Brush making, pea picking, feather sorting, carding, etc. of buttons, etc., stuffed toys, basket making chocolates and sweetmeats, cosaques, Christmas stockings, etc., Textile weaving, Lampshades.

Note:- This table is included in the report on the instructions of the Ministry of Health, for the benefit of the Ministry of Labour. Prior to 1961 it was sent as a separate report to the Ministry of Labour.

F. J. G. LISHMAN

Medical Officer of Health.

ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

Showing Sanitary Circumstances of the Area for
the Year Ended 31st December, 1968.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for the year 1968.

H. SHARRATT

Chief Public Health Inspector

GENERAL INFORMATION

Situated in the South West corner of Wiltshire bordering Somerset and Dorset, the Mere and Tisbury Rural District consists of twenty-six parishes. The two larger Parishes of Mere and Tisbury are semi-urban in character providing facilities for the day to day needs of the surrounding parishes. The A.303 road bearing heavy traffic to the West runs for fifteen miles through the district in the North and the A.30 for eight miles in the South. The London/Exeter line of the Southern Region British Railways bisects the district from East to West and there is now only one station with limited services in operation i.e. Tisbury.

Industry is predominantly agricultural but additional industry is now established in Mere and Tisbury. Brush making has been carried out for many years in Mere and now a factory is in operation for the manufacture of Steel Chimneys. In Tisbury, Dog Food, Agricultural Implements and Furniture and Fittings are now manufactured.

Two large private schools for Girls are situated in the district; Cranborne Chase School at Wardour and St. Mary's Convent at Donhead St. Mary. There is one privately run Home for the Elderly and Pyt House is now run by the Mutual Households Association.

SANITARY INSPECTIONS OF THE AREA

Public Health Act, 1936 and General Sanitation

Number of Inspections	re: Water Supply	..	..	..	..	..	..	64
"	re: Watercress..	..	..	..	..	..	..	25
"	re: Swimming Pools	..	..	..	..	..	..	25
"	re: Milk Samples	..	..	..	..	..	..	174
"	re: Food Inspection..	..	..	..	..	..	..	8
"	re: Infectious Diseases/Suspected Dysentery							
	and to obtain samples	..	..	..	..	..	..	7
"	to take sewage samples	..	..	..	..	..	..	12
"	re: Drainage and/or Sanitary Accommodation	..						309
"	re: Farm Drainage	..	..	..	..	..	..	35
"	re: Pollution of Water Courses/Rivers							
	Prevention of Pollution Act, 1961	..	..	..	..	..	..	21
"	re: Miscellaneous Complaints	..	..	..	..	..	..	59
"	re: Infestations	..	..	..	..	..	..	31
"	re: Filthy and Verminous Premises	..	..	..	..	..	..	1
"	re: Aged and infirm persons	..	..	..	..	..	..	7
"	re: Gypsies	..	..	..	..	..	..	32
"	re: Moveable Dwellings	..	..	..	..	..	..	18
"	re: Noise..	..	..	..	..	..	..	6
"	re: Litter	..	..	..	..	..	..	5
"	re: Outworkers..	..	..	..	..	..	..	23
"	re: Dangerous Structures..	..	..	..	..	..	..	3

HOUSING

Council dwellings completed in 1968:- Nil

	<u>Houses</u>	<u>Flats</u>	<u>Bungalows</u>
Council dwellings under construction in 1968	12	8	15

Council Houses: Changes of Tenancy during 1968 30

REFRIGERATORS: Tenants of Council Houses may rent refrigerators and 205 tenants are taking advantage of this scheme.

HOUSING STATISTICS FOR 1968

1.	Number of permanent dwellings in district at end of year	4,159
2.	Number of permanent dwellings in district owned by local authority	763
3.	Number of temporary dwellings in district owned by local authority	Nil
4.	Number of applications for Council dwellings at end of year	272
5.	<u>Inspection of dwellings during year:</u>	
	(i). Number of dwellings inspected under Public Health or Housing Acts	129
	(ii). Number of dwellings found to be unfit	79
6.	Number of dwellings rendered fit in consequence of informal action	47
7.	<u>Action under Statutory Powers.</u>	
A.	<u>Proceedings under Public Health Acts</u>	
	(i). Number of dwellings where formal notices were served	Nil
	(ii). Number of dwellings made fit as a result of formal notices	
	(a) By owners	Nil
	(b) By local authority in default of owners	Nil
B.	<u>Proceedings under Sections 9 and 16 Housing Act, 1957</u>	
	(i). Number of dwellings where notices were served requiring defects to be remedied	Nil
	(ii). Number of dwellings rendered fit after service of formal Notices	
	(a) By owners	Nil
	(b) By local authority in default of owners	Nil
C.	<u>Proceedings under Sections 16 and 17 Housing Act, 1957</u>	
	(i) Number of Demolition Orders made	Nil
	(ii) Number of dwellings demolished as result of Demolition Orders	Nil
	(iii) Number of undertakings accepted to make fit or not to re-let	1
	(iv) Number of dwellings made fit as result of undertakings	Nil
D.	<u>Proceedings under Sections 16, 17, 18, 26 and 35 Housing Act, 1957 and Section 26 Housing Act, 1961</u>	
	(i) Number of dwellings where Closing Orders were made	4
	(ii) Number of dwellings closed as result of Closing Orders or undertakings by owners	4
E.	<u>Proceedings under Sections 17, 42, 43, 46 and 48 Housing Act, 1957</u>	
	(i) Number of dwellings in clearance areas upon which Demolition Orders were made	Nil
	(ii) Number of dwellings demolished as result of Demolition Orders	Nil
	(iii) Number of dwellings in clearance areas which have been retained as temporary accommodation	Nil

F. Proceedings under Section 76 Housing Act, 1957

(i) Number of cases of overcrowding at end of year	3
(ii) Number of cases of overcrowding discovered during year	4
(iii) Number of cases of overcrowding abated during year	3

Houses erected or converted during year

1. 1. 68 to 31.12. 68	Houses erected during year		<u>Gained</u> from conversion of large houses into flats or dwellings	<u>Lost</u> from conversion of two or more houses into one
	For slum clearance	For other purposes		
Local Authority	Nil	Nil	Nil	Nil
Private Enterprise		42	Nil	6
Housing Associations etc.		Nil	Nil	Nil

STANDARD GRANTS AND DISCRETIONARY GRANTS

DISCRETIONARY GRANTS

Applications		Rejected (3)	Under Consideration (4)	Withdrawn (5)
Received (1)	Approved (2)			
6	6	Nil	Nil	1

Number of houses improved during 1968 as a result of Grants: 7
Value of Grants made during 1968: £2,695

STANDARD GRANTS

Applications		Grants Completed 1968							Value of Grant
Received	Approved	Bath	Wash-Basin	Hot Water Supply	Water Closet	Larder	Septic Tank	Bath Ext.	
13	11	13	12	12	12	10	6	4	2,839

Grants Cancelled: 3

RENT ACT 1957

Applications for Certificate of Disrepair	NIL
Certificates issued	NIL
Undertakings to effect repairs accepted	NIL
Applications for cancellation of Certificate	NIL
Certificates cancelled	NIL
Inspections	NIL

RENT ACT 1965

During the year two complaints of harassment were received under Section 30 of the Act.

Representations to the landlords resulted in the responsibility for the management of the two dwellings being withdrawn from the caretakers.

CARAVANS

There has been no demand for a site to be provided and operated by the Council. As previously reported, with increasing traffic along the A.303, particularly with the larger number of holiday travellers using this route to the West, some provision of a Service Area will be necessary.

Sites Licensed

1. More than one Caravan on Site.

A.30, Donhead St. Mary - 6 Caravans (Residential) and holiday.

2. Caravan Club Licence.

Willoughby Hedge Filling Station - Not exceeding 5 Caravans.

3. Single Caravan on Site - 17.

GYPSIES: There is one encampment within the District at The Dene, Hindon. The area is one of approximately 10 acres and is divided into seven sites owned by the occupants. The number of families accommodated has now been reduced to seven. Two families have been rehoused in Council Houses.

The children attend Hindon School and Dunworth Secondary Modern School, Tisbury.

The Caravan Sites Act 1968 received Royal Assent in July, 1968 but Part II of the Act dealing with Gypsy Encampments has not yet come into operation. The aim is to spread the burden of providing caravan sites fairly throughout England and Wales. Gypsies are defined, for the purposes of the Act, not by race but as persons of nomadic habit of life. The Act does not extend to people who live in tents or other makeshift accommodation.

The major duty to provide sites is put on County Councils. Sections 10 and 11 prohibiting unauthorised camping by gypsies will become operative only when sufficient sites have been provided.

Circular 49/68 introducing the Act emphasised that gypsies should not be needlessly moved on from place to place until sites have been provided for them and Local Authorities should not drive them out of their areas to become the responsibility of neighbouring authorities.

Semley Common Ten families settled on Semley Common at Harthill during the year following pressure exerted in other districts. It did not take long before an extensive accumulation of rags, scrap and car bodies appeared and with the wet summer and autumn this beauty spot was desecrated.

The owner of the land instructed solicitors to serve notices on each caravan owner and at the end of the year only one family remained.

CAMPING Camp Mohawk at Fonthill Abbey Woods was again open during the SITE: summer months. This is a well organised site with ample water supply, sanitary accommodation and showers.

NUISANCES

Public Health Acts

Complaints investigated	..	..	..	..	..	..	..	..	59
Informal notices served	..	..	..	..	..	..	..	..	22
Informal notices complied with	..	..	..	..	..	..	..	..	22

RODENT CONTROL

Complaints of Rodent infestation are investigated and necessary treatments carried out. Business premises are charged for this work but usually private contractors provide a service for agricultural premises. Refuse Tips are regularly treated.

Sewers at Mere, Zeals, Tisbury, Hindon and Maiden Bradley were baited. Little evidence of infestation was found.

	Non Agricultural	Agricultural
No. of properties inspected following notification	110	4
No. infested by rats	101	4
" " " mice	9	Nil
No. of properties surveyed	227	5
No. infested by rats	Nil	Nil
Notices served under Section 4	Nil	Nil

WATER SUPPLY

The West Wilts Water Board supply water throughout the Council's district.

The source of water is at Burton Fields, Mere and is pumped to a Reservoir on Mere Down. This linked to Reservoirs at Hatch, Hindon, East Knoyle, Sutton Mandeville, Donhead St. Andrew and Teffont.

	DIRECT		BY STANDPIPE	
	No. of Houses	Population (approx.)	No. of Houses	Population (approx.)
Alvediston	10	35		
Ansty	44	126		
Berwick St. John	94	283		
Chilmark	112	311		
Donhead St. Andrew	119	405		
Donhead St. Mary	298	906		
East Knoyle	181	612		
Fonthill Gifford	6	20		
Fonthill Bishop	8	24		
Hindon	216	506	7	20
Kilminster	55	290		
Maiden Bradley	130	297		
Mere	758	2,112		
Sedgehill	25	123		
Semley	98	283		
Stourton	14	49		
Sutton Mandeville	32	88		
Swallowcliffe	49	155		
Teffont	87	244		
Tisbury	539	1,650		
Tollard Royal	29	76		
West Knoyle	26	89		
West Tisbury	92	318		
Zeals	174	451		

The following data dealing with Bacteriological Analysis is submitted in accordance with Circular 13/47 Ministry of Health.

ANALYSIS OF WATER SUPPLIES (Bacteriological)

(a) Public Supplies

Frequent water samples are taken by the West Wilts Water Board in all parts of the area. Copies of the analyses are sent to the Medical Officer of Health and 218 samples were taken in 1968 from mains, reservoirs and sources.

A number of unsatisfactory results were received in respect of samples taken by the West Wilts Water Board and concerned the spring water supply, prior to chlorination, at Dunkerton Springs, Maiden Bradley. No satisfactory reports were received of water from this source following chlorination.

The following samples were taken by this department:-

Number of samples taken during the year	..	..	..	5
Number found to be satisfactory	..	..	..	5
Number found to be unsatisfactory	..	..	..	Nil

(b) Private Sources

Number of samples taken during the year	..	..	..	24
Number found to be satisfactory	..	..	..	18
Number found to be unsatisfactory	..	..	..	6

The Manor House at Alvediston was connected to the mains water on the advice of the Public Health Department following unsatisfactory reports of the condition of the private water supply.

Mill Lane Cottage, Sutton Mandeville

Two samples, both unsatisfactory, were taken and the occupant now obtains water from an alternative source.

ANALYSIS OF WATER SUPPLIES (Chemical)

Chemical Analysis of a sample taken from the Burton Field source at Mere.

Physical Characteristics - Clear and bright.

Turbidity	Nil
Colour	Nil
Odour	Nil
Reaction pH.	7.4

Parts per million

Free Carbon Dioxide	19
Electric Conductivity	410
Dissolved Solids dried at 180°C	300
Chlorine present as Chloride	9
Alkalinity as Calcium Carbonate	215
Hardness: Carbonate	215
Non-carbonate	<u>25</u>
Nitrate Nitrogen	3.2

Nitrite Nitrogen	Absent
Ammoniacal Nitrogen	0.03
Oxygen Absorbed	0.10
Albuminoid Nitrogen	0.00
Residual Chlorine	...
Metals: Iron, Zinc, Copper, Lead	Absent
Fluoride	Less than 0.1
Silica	20

Mineral Analysis (Parts per million)

Cations p.p.m.	Anions p.p.m.	Hypothetical Combinations p.p.m.
Ca 94	CO ₃ 129	Calcium carbonate 215
Mg 1	SO ₄ 13	Calcium sulphate 20
Na 7	Cl 9	Calcium chloride 6
K 0.02	NO ₃ 16	Magnesium chloride 5
		Sodium chloride 3
		Sodium nitrate 21
		Potassium nitrate 2
		Silica 20
		<hr/> Total 292 <hr/>

This sample is clear and bright in appearance.

The water is just on the alkaline side of neutrality, hard in character but not unduly so, it contains no excess of mineral constituents and it is free from iron and other metals.

Organic quality is very satisfactory.

From the aspect of the chemical and mineral analysis these results are indicative of a pure and wholesome water suitable for public supply purposes.

Chemical Analysis of a sample taken from the Dunkerton Springs source at Maiden Bradley.

Appearance - Bright with a few particles.

Turbidity	Less than 1
Colour	Nil
Odour	Nil
Reaction pH.	7.4

	Parts per million
Free Carbon Dioxide	16
Electric Conductivity	370
Dissolved Solids dried at 180°C	280
Chlorine present as Chloride	10
Alkalinity as Calcium Carbonate	175
Hardness: Carbonate	175
Non-carbonate	<u>30</u>
Nitrate Nitrogen	4.5
Nitrite Nitrogen	Absent
Ammoniacal Nitrogen	0.00
Oxygen Absorbed	0.20
Albuminoid Nitrogen	0.00
Residual Chlorine	...
Metals: Iron, Zinc, Copper and Lead	Absent
Fluoride	Less than 0.1
Silica	28

Mineral Analysis (Parts per million)

Cations		Anions		Hypothetical Combinations	
p.p.m.		p.p.m.		p.p.m.	
Ca	80	CO ₃	105	Calcium carbonate	175
Mg	1	SO ₄	18	Calcium sulphate	27
Na	8	Cl	10	Calcium chloride	5
K	2	NO ₃	19	Magnesium chloride	5
				Sodium chloride	6
				Sodium nitrate	21
				Potassium nitrate	5
				Silica	28
					<hr/>
				Total	272
					<hr/>

This sample is practically clear and bright in appearance because it carries only a few particles of matter in suspension.

The water is just on the alkaline side of neutrality, hard in character but not unduly so, it contains no excess of mineral constituents and it is free from iron and other metals.

Organic quality is very satisfactory.

From the aspect of the chemical and mineral analysis these results are indicative of a pure and wholesome water suitable for public supply purposes.

Watercress Beds

Routine inspections were made and water samples taken from the Watercress Beds at Mere, Zeals, Donhead St. Andrew and Donhead St. Mary.

Number of water samples taken from Beds and Sources	24
Number found not to be entirely satisfactory	16

Watercress Samples

After washing in Chlorinated Water:	Satisfactory: 8	Unsatisfactory: 3	Total: 11
-------------------------------------	-----------------	-------------------	-----------

All watercress is washed in chlorinated water after cutting and Hydro Cooling is carried out at two beds.

SWIMMING POOLS

There are now eight swimming pools in the district.

Pyt House Club	- Open to Members.
Tisbury Secondary Modern School	- Constructed by Public subscription and also open to the public.
Mere Secondary Modern School	- School children only.
St. Mary's Convent	- Private School.
Cranborne Chase School	- Private School.
East Knoyle School	- School children only.
Semley Primary School	- School children only.
Ludwell Primary School	- School children only.

Regular checking of Chlorine content is carried out and two bacteriological samples taken proved satisfactory.

SEWERAGE AND SEWAGE DISPOSAL

Five parishes have a main sewerage system; in the remainder of the District disposal is by Septic Tank, Cesspool or Pail Closet. The conversion to waterborne sanitation continues slowly and during 1968 of 68 plans submitted for improvements to dwellings 49 were in respect of properties with no sewer available.

A Cesspool Emptying Service for domestic properties was commenced on the 1st January, 1965 and the following statistics are of interest:-

Number of owners registering during year	94
" " " previously registered	1,162
" " tanks emptied during year	1,041

Number of properties served by these tanks	1,308
" " loads removed	1,409
" " Council Estates with disposal works to be serviced	33
Number of Council Estate sewage tanks emptied	57
Approximate gallonage of sewage removed	1,557,000

In addition to the foregoing the cesspit on the mobile toiler trailer was emptied daily between 31st May and 30th September.

The service is operated with a 1,000 gallon Eagle Cesspit Emptier and two men. Disposal of the sewage is to farmland and to Sewage Disposal Works at Mere and Zeals. Tanks are emptied once per year free and subsequent servicing within that year is charged at 30s. Od., per time.

The Council agreed to the loan of the vehicle and operators to the Warminster and Westbury Rural District Council during the construction of a sewage scheme and it was possible to arrange this aid for 17 days in the year.

Tisbury

The works, completed in 1959, continue to operate in a satisfactory manner. Sewage gravitates to the works from the greater part of the village and from the Tuckingmill area is raised by Ejector to the Main Sewer. The sewage is raised within the works to sedimentation tanks and gravitates through percolating filters and humus tanks with the final effluent discharging to the River Nadder.

Trade Effluent is accepted from the Factory manufacturing Dog Food. Regular sampling of this effluent and the final effluent at the works is carried out. An attendant is employed here with assistance from mobile staff.

New connections to Sewers 9

Mere

Sewage from the area north of Edgebridge gravitates to the works and that from Holwell, Southbrook, Burton and The Causeway is lifted via a pumping station at Edgebridge into the trunk sewer. A further pumping station is sited at the southern end of The Causeway.

Industry in Mere has no trade effluent problem. Connections here are solely for Canteen and Staff sanitary accommodation.

A sewage works Manager and an attendant are employed at these works.

New connections to Sewers 12

Hindon

These works, completed in 1964, continue to function in a satisfactory manner. Sewage gravitates to the pumping station and is lifted to high level to gravitate through the works with final disposal of effluent by land irrigation.

An attendant works here two days per week with regular visits from mobile staff.

New connections to Sewers Nil

Zeals

The system is an adaptation of the scheme installed for the use of Zeals Aerodrome and taken over by the Council at the end of the war. The Sewage Disposal Works are situated in the neighbouring Rural District. The works continue to function in a satisfactory manner.

Extensions to the sewers have been approved in respect of Bells Lane and Portnells Lane.

New connections to Sewers 4

Maiden Bradley

The work is virtually complete on the scheme for this parish. Part of the existing sewers will have been relaid to accept sewage from The Rank and the extension to the sewered area. A pumping station will lift sewage from the Frome Road back to High Street and a new Sewage Disposal Works is being constructed.

New connections to Sewers 1

East Knoyle

A scheme has been prepared by the Consulting Engineers and approved by the Council. Sewage from The Green, Milton and Upton will gravitate to a pumping station near Park Farm and will be lifted to the sewer serving East Knoyle village, then by gravity to the works. Holloway and the Turnpike will gravitate to a pumping station at the end of Holloway Lane and then be lifted to the sewage works. The sewage from Underhill will gravitate to Brickyard Farm and be pumped into the Holloway Sewer.

An Inquiry into this scheme was held by an Inspector of the Ministry of Housing and Local Government in September. The scheme was accepted technically satisfactory but the degree of need did not meet the criteria referred to in Circular 42/66 and 9/68.

Chilmark and Teffont

The Consulting Engineers are proceeding with the preparation of a joint scheme for Chilmark and Teffont. Approximately 200 dwellings will benefit.

PUBLIC CLEANSING

Household and Trade Refuse Collection

The Council operates a fortnightly collection of refuse throughout the district. The collection is kerbside. Efforts are made to assist the aged or handicapped as much as possible. Two vehicles are operated with one driver and one loader to each vehicle.

Vehicles employed:	20 cu. yard PAKAMATIC	(Diesel)
	18 cu. yard DUAL TIP	(Diesel)

Provision of Dustbins

Dustbins are provided only for the Council Houses.

The Council have not taken action under Section 75 of the Public Health Act to provide dustbins, either as a rate borne service or at a charge.

Disposal

The disposal of refuse is to dumps at Ansty, Maiden Bradley, East Knoyle and Donhead St. Andrew.

Miles run during the year	approx. 25,298
-------------------------------------	----------------

LITTER ACT, 1958

Litter bins are installed at various points throughout the District and the Wiltshire County Council Highways Department co-operate with the provision of litter bins on laybys. The litter bins are cleared before each weekend by the Refuse Collectors and the County Council have agreed to contribute, at the rate of 3s. 0d. per bin clearance on trunk roads and 1s. 6d. on other laybys.

CIVIC AMENITIES ACT 1967

The administration of Part III of the Act is carried out by the Public Health Department and the Public Health Inspectors are authorised officers.

Five vehicles were abandoned at various points on the A.303 and were subsequently removed after formal action.

One vehicle was abandoned on the A.30 and removed after formal action.

Five vehicles were abandoned, owners traced and removal effected after informal action.

Forty-six inspections and visits were made in connection with the above.

For the purposes of Section 20 arrangements have been made for the safe storage of vehicles removed and awaiting collection.

For the purposes of Section 18 the tips at Ansty and East Knoyle are places where residents may deposit refuse at all reasonable times.

SALVAGE

Householders are requested to put out Newspaper, Cardboard and Magazines separately parcelled for ease of handling and from time to time during the year small advertisements are inserted in the local paper.

Without losing sight of the primary object, i.e. the collection and disposal of refuse, the following table shows a steady income from this source.

The four men each receive 10% of the income as bonus.

	Tons.	Cwts.	Qrs.	£	s.	d.
Unbaled Pams	11	19	2	35.	19.	1.
Newsprint	30	19	2	246.	5.	9.
Rags, Gunny, String		3	2	1.	16.	3.
	43	2	2	284.	1.	1.

The Salvage Yard at Longcross, Zeals consist of garage accommodation, baling and storage buildings and sanitary accommodation for the employees.

PUBLIC CONVENIENCES

Public Conveniences are provided in the Car Park at Mere and the High Street at Tisbury.

At Mere, the Council has provided the best possible facilities for the travelling public; the conveniences are tiled throughout and washing facilities with soap, hot water and hand dryers provided for both sexes.

These conveniences are heavily used by the increased traffic along the A.303 and for the first time, since building, damage was caused in the male section. Thieves, subsequently apprehended, stole copper piping.

It is anticipated that plans to provide new sanitary accommodation at the Car Park, Tisbury will be commenced during 1969.

For the second year a mobile toilet trailer was sited on the layby at Willoughby Hedge on the A.303 from the Spring Bank Holiday to the 1st October. The vehicle, provided by the Wiltshire County Council, is maintained by the Mere and Tisbury Rural District Council. The entire cost of maintenance being met by the County Council this year.

A pre-fabricated public convenience was sited on the A.303 at Zeals to the West of Mere. The provision of septic tank drainage makes far easier maintenance. Full facilities are available as at Mere and minor vandalism was experienced on one occasion.

The Council is fortunate in having the services of an attendant who takes pride in keeping the accommodation in spotless condition.

INSPECTION AND SUPERVISION OF FOOD

Food Hygiene Regulations, 1960

Number of inspections made: 126

		<u>Regulation 16</u>	<u>Regulation 19</u>
Public Houses, Hotels	35	35	35
Grocery Stores	55	54	49
Fishmongers	3	3	3
Butchers Shops	6	6	6
Cafes	14	13	13
Hospitals and Institutions	1	1	1
Parish Halls, Clubs, Sweet Shops etc.	24	16	11
Schools	20	20	20
Canteens	2	2	2

Number of Food Premises registered under Section 16, Food & Drugs Act, 1955.

1. Preparation or Manufacture of Sausages	..	..	..	8
2. Sale or Preparation of Cooked Meats	..	..	..	16

There were no prosecutions during the year.

MOBILE CANTEENS

During the summer mobile canteens appear on laybys and verges. Routine inspections are carried out but the short stay on site makes adequate control difficult.

CLEAN FOOD CAMPAIGN

The promotion of Clean Handling of Food is by the slow process of individual education.

<u>Headings</u>	<u>Activities</u>
1. Lectures or Classes for Food tradesmen and their employees	None. Advice to individuals and leaflets.
2. Exhibitions	Display - as part of a Public Relations Exhibition at a large Agricultural Show.
3. Lectures etc. for General Public including Women's organisations	Three lectures during year.
4. Formation of Clean Food Guild	None.
5. Formation of Local Codes of Practice	None.
6. Any other relevant activities	The exhibition of posters by the Public Health Department.

MILK

The Wiltshire County Council delegated licensing and sampling powers under the Milk (Special Designations) Regulations, 1960.

Under the Delegation Agreement the Rural District Council receive 15s. Od. per sample taken.

LICENCES

Dealers (Pre-packed Milk)	Licence - Pasteurised	18
Dealers (Pre-packed Milk)	Licence - Sterilised	3
Dealers (Pre-packed Milk)	Licence - U.H.T.	3

Other dealers delivering milk in the District are licensed by the Authority in whose district their premises are situated.

A requirement of the delegation was the regular sampling of milk. The recommended range and frequency of milk sampling required, being:-

Table 1

Grade of Milk	Sampling Sources	Examination required	Sampling frequency	Annual number of Samples
Untreated Milk	Producer Retailers and Distributors	Methylene Blue	Monthly	Nil
		Biological	Quarterly	Nil
Pasteurised Milk	Distributors obtaining milk from Wilts Pasteurising Plants	Phosphatase and Methylene Blue	Quarterly	24
		Phosphatase and Methylene Blue	Monthly	180
Sterilised Milk	Distributors	Turbidity Test	Monthly	24

TOTAL SAMPLES: 228

Samples taken during 1968:-

174 routine inspections of milk shops, dairies and delivery vans were made.

Table 2

No. of raw milk samples for statutory test		No. of raw milk samples for biological test		No. of heat treated samples for statutory tests		No. of bottle rinses (Sets) for bacteriological test	
Pass	Fail	T.B.		B.A.		Pass	Fail
		Pos.	Neg.	Pos.	Neg.		
Nil	Nil	Nil	Nil	Nil	Nil	178	Nil

One complaint of milk deficient in milk fat was received and passed to Wiltshire County Council for action. A court case ensued and a fine of £5. and costs was imposed by the Magistrates.

Milk Supplies - Brucella Abortus

Number of samples of raw milk examined Nil

Cream

Premises at which cream is heat treated.. .. Nil

Premises at which heat treated or raw creams are
used in the manufacture of other products Nil

ICE CREAM

Ice Cream is not manufactured in the District and that sold within the District is pre-packed.

No cases of illness from the consumption of this food was reported.

Premises registered for the sale of Ice Cream.. .. 59

FOOD CONDEMNED

The undermentioned foodstuffs were condemned as unfit for human consumption.

223	Various Ice Creams.
13	Mousses.
1	Yorkshire Pudding.
9	Packets Puff Pastry.
10	" Short Crust Pastry.
29	" Fish Fingers.
2	" Smoked Haddock with Butter.
6	" Fish Cakes.
4	" Cod Steaks
4	" Fish Steaks.
1	" Plaice.
2	" Haddock.
13	" Steakburgers.
8	" Beef in gravy.
6	6lb. tins Corned Beef.
	20lbs. Shin Beef.
	20lbs. Chuck Beef.

Sampling under the Food and Drugs Act is carried out by the Wiltshire County Council.

FOOD COMPLAINTS

The following commodities were the subject of complaint:-

1. Rollmop Herrings - The purchaser complained of symptoms of diarrhoea following consumption. The remainder of the jar of herrings was taken for analysis. No pathogens were isolated.
2. Loaf of Bread with piece of wire embedded in crust - The wire had become embedded in the loaf when placed on colling tray. Warning issued.
3. Tin of Peas containing foreign body - On examination found to be a crushed pea pod.

Carcases Inspected in 1968

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	Nil	Nil	Nil	Nil	Nil
Number inspected	Nil	Nil	Nil	Nil	Nil
Number and Parts condemned	Nil	Nil	Nil	Nil	Nil

Liquid Egg (Pasteurisation) Regulations, 1963

Number of Pasteurising Plants in the district..	..	..	Nil
Number of samples of liquid egg taken	..	..	Nil

SLAUGHTERHOUSES

The two private Slaughterhouses within the District did not comply with the Construction Regulations and with the Appointed Day for these Regulations to apply being confirmed as the 1st January, 1961, for the Mere and Tisbury Rural District Council, both ceased to operate.

SLAUGHTER OF ANIMALS ACT, 1958

Number of renewals of Licences issued to Slaughtermen:	2
Number of new Licences issued to Slaughtermen:	Nil

Poultry Inspection

There are no poultry processing premises within the district.

DISEASES OF ANIMALS (WASTE FOODS) ORDER, 1957

The Wiltshire County Council have delegated their functions under this Order to District Councils and the Public Health Inspector is authorised to act as Inspector of the Local Authority under the 1960 Act for the purpose of executing and enforcing the provision of the Order.

No. of premises Licensed	Premises where swill is boiled for resale	Types of Boiling Plant		Breaches of Order detected
		Elect/ Gas	Coal/ Wood	
1	Nil	1	Nil	Nil

CLEAN AIR ACT, 1956

No action was necessary during 1968 to abate air pollution.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1961

There are no premises requiring Licensing or Registering under the above Act.

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

The Public Health Inspectors are authorised officers for the purpose of this Act.

Number of Establishments Licensed 1

PET ANIMALS ACT, 1951

The Public Health Inspectors are authorised officers for the purpose of this Act.

Number of Establishments Licensed 1

OFFICES SHOPS AND RAILWAY PREMISES ACT, 1963

Prescribed particulars to be included in the Annual Report to the Minister of Labour by Local Authorities and the London County Council under Section 60.

Table A - Registration and General Inspections.

Period covered: to December 31st, 1968.

Class of Premises	Number of premises registered during the year	Total number of registered Premises at end of year	Number of Registered Premises receiving general inspection during the year
(1)	(2)	(3)	(4)
Offices	1	16	7
Retail Shops	1	40	12
Wholesale shops, warehouses	-	-	-
Catering establish- ments open to the public, canteens	-	12	5
Fuel Storage Depots	-	-	-
TOTALS	2	68	24

TOTAL Number of visits to registered Premises under the Act - 52

H. SHARRATT

Chief Public Health Inspector

